



Department of Health & Social Services
Division of Public Assistance
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FEE AGENT MANUAL

A Fee Agent's Guide to the Public Assistance Application Process

State of Alaska
Department of Health & Social Services
Division of Public Assistance

Fee Agent Manual

December 2011

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**Benefit Hotline
1-888-804-6330**

**Alaska Quest Card and
Direct Deposit
1-888-620-1111**

**District Office addresses and phone numbers are in Appendix A.
Use the addresses in Appendix A to submit applications, billings, and other forms.**

Fee Agent Manual

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Chapter 1

Fee Agents in the Division of Public Assistance

The Division of Public Assistance (DPA) has volunteers called fee agents to help low-income individuals and families apply for financial and medical assistance in rural communities and villages without DPA offices. This manual helps fee agents understand their role in helping individuals and families apply for assistance and become familiar with the process of completing the application packet.

Fee agents, although volunteering, receive a fee for their service. Their service is specific to providing forms, interviewing the applicant to ensure all questions are answered on the application and submitting the paperwork in a packet to the nearest DPA office. Fee agents are not eligibility technicians. They do not approve applications and do not influence who will or will not receive benefits.

Fee agents work with the caseworkers to gather information from the applicants. However, it is the caseworker who makes the decision and enters information into a computer to issue benefits. Once the fee agent sends in a complete application packet, the caseworker works directly with the applicant if there are questions or if additional information is needed.

Fee agents must have a signed contract, the Fee Agent Provider Agreement (FA 33). Fee agents who work on behalf of another agency will also be required to complete a Request for Taxpayer ID# and Information form (Substitute Form W-9). These forms are kept on file with DPA. Before an individual can work as a fee agent, they must receive training provided by a DPA staff.

1.1 The Division of Public Assistance

The Division's mission statement is: "We promote self-sufficiency and provide basic living expenses to Alaskans in need."

The Division of Public Assistance provides services for Alaskans in need to get employment and meet basic food, shelter, and medical needs. To receive these services and benefits, individuals and households are required to apply.

DPA has regional offices located in Anchorage, Fairbanks and Ketchikan. The regional offices supervise 18 offices located in Anchorage, Eagle River, Juneau, Fairbanks, Bethel, Ketchikan, Kodiak, Kenai/Soldotna, Homer, Nome, Kotzebue, Sitka, and Wasilla. The Division uses the fee agent process only in areas that do not have a district office. These areas must also be located more than 50 road miles from a district office.

1.2 How to Use This Manual

As a fee agent, you will help Alaskans apply for public assistance programs. This manual has the information you need to help applicants decide which forms they must complete. It provides information on how to do an interview and how to complete the Fee Agent Interview Report form (FA 1).

Before you receive your first application you should familiarize yourself with this manual by following these steps:

- 1)** Read the Table of Contents. Find out what the manual contains and look through the pages to see how the manual is organized.
- 2)** Read the definitions in Appendix B – Definitions. These are list of words often used on applications and forms, and by the caseworkers.
- 3)** Read Chapter 2 - Fee Agent Duties and Responsibilities – to learn more about your role as a fee agent, how you will get trained and get paid for your services you provide as a fee agent.
- 4)** Read Chapter 3 – How to Interview the Applicant – to get guidance on how you can successfully interview an applicant.
- 5)** Read Chapter 4 - Verifying Information – to learn about your responsibility in obtaining and verifying documents applicants must submit with their application.
- 6)** Read Chapter 5 and familiarize yourself on each program offered by DPA. You may also read the program descriptions on the front page of the Application for Services (GEN 50B). If you have access to the internet, the program descriptions are on the DPA web page: <http://www.hss.state.ak.us/dpa/>.
- 7)** Practice filling out an application form and review the Guide to the Application for Services (GEN 50B) in Appendix C.
- 8)** Review the Fee Agent Interview Report (FA 1) in Appendix E.
- 9)** Familiarize yourself with the forms listed in Appendix D. The form number is on the bottom left hand corner of each form. The local office will provide you with a supply of forms. You also can get most forms from the Internet at: <http://dpaweb.hss.state.ak.us/node/37>.

1.3 Calling the DPA Office

If You Have Questions about the Manual

If there is any information in the manual that you do not understand or need to clarify, call the fee agent liaison at your local Division of Public Assistance office, or the Statewide Fee Agent Coordinator at 269-7880. DPA offices have a toll free number you can use if you need to call your local office. You may also make a collect call if the office does not

have a toll free number. When you make a collect call, be sure to identify yourself as a fee agent.

If You Have Questions about an Application

Call the public assistance office and:

- 1)** Give your name, state that you are a fee agent, and give the name of the village from where you are calling.
- 2)** Explain the problem.

If the Applicant Has Questions

Individuals applying for or receiving public assistance may ask you for information about their application. Tell the individual that they will receive a letter from DPA about the decision made on their application. Use the following telephone numbers for specific questions about their application or benefits:

- If they want to know if their application has been processed, give them the toll-free number for the local office.
- If the applicant wants to know how much they will receive or if their benefit was mailed, they can call 1-888-804-6330. The applicant must have their social security number or case number when they call this number. This information is available only after the worker makes a decision on the application.
- If they have questions about direct deposit or problems with their Alaska Quest Card, they can call 1-888-620-1111.

If the Applicant Has a Complaint

Sometimes applicants have a complaint about the way their case has been handled and they might come to you with the complaint. Tell the applicant that they can submit complaints in writing, in person, or by telephone to the Regional Office or nearest local office. They may also use the Complaint Form (GEN 87) to submit a complaint. Consider informing the applicant to call the office that processed their application and ask to speak to a supervisor to discuss the complaint.

If the Applicant Wants to Request a Fair Hearing

Federal and state laws give any individual who believes DPA made a mistake in denying, stopping, or reducing his or her assistance the right to request a fair hearing. At the hearing, applicants have the chance to show why they believe the action taken by the Public Assistance office was incorrect and must be changed. Information about fair hearings is on the back of each letter or notice mailed to the applicant. Applicants may request a fair hearing either in writing, by phone or in person. You may also find this information in the Rights and Responsibilities (GEN 51) form and All About Fair Hearings (GEN 84) form.

Chapter 2

Fee Agent Duties and Responsibilities

As a fee agent, you help the people in your community to apply for public assistance. Your main role is to assist them in completing the application and forms for public assistance. Fee agents do not make decisions on who is eligible.

Your Duties and Responsibilities as a Fee Agent:

- 1)** Provide basic public assistance program information to anyone wanting to apply.
- 2)** Give application and other forms to individuals interested in applying for public assistance programs.
- 3)** Help applicants complete all of the necessary forms.
- 4)** Request proof of information on the application or recertification form.
- 5)** Always attempt to interview the applicant the same day you receive the application. If the applicant is not available for an interview the same day you receive the application, the interview must be completed by the following day.
- 6)** **Complete the Fee Agent Interview Report (FA 1)** (except for Denali KidCare and Senior Benefits). A copy of the Fee Agent Interview Report (FA 1) is shown in Appendix E.
- 7)** **Sign the application form and the Fee Agent Interview Report (FA 1)**. The start date for some benefits depends on when you sign the application form. It is important to sign it as soon as you receive a completed application.
- 8)** Mail, fax or scan the application or recertification, Fee Agent Interview Report (FA 1) and other documentation immediately after the interview. Do not hold the application while waiting for the applicant to bring in proof or documentation. If you are unable to conduct the interview by the day after you receive the application, you must mail, fax or scan the application immediately to DPA. **Do not give the forms back to the applicant to mail**. If you fax or scan in an application, you must also send the original into the office with the needed verifications. Send the application packet to the Division of Public Assistance office that serves your area.

Note:

Fee agents who choose to scan applications by email to DPA must sign up and register with Yousendit. To get more information, contact your fee agent liaison.

- 9) Fill out and mail, fax or scan the Fee Agent Monthly Billing Report Form (FA 48) to the DPA office that serves your area by the 10th of each month.

Remember, the office must receive your signed report by the 10th of each month. If the office receives your report after the 10th, it will be submitted for payment the following month.

A copy of the Fee Agent Monthly Billing Report Form (FA 48) is shown in Appendix F.

2.1 Privacy

As a fee agent, it is your responsibility to:

- 1) Protect the privacy of people who apply for public assistance.
- 2) Not use any information you gain as a fee agent to benefit you personally.

All information about an applicant or recipient is confidential. Federal and State laws protect information that you receive. You must not give this information to anyone, or discuss it with anyone, except those directly involved in the administration of public assistance programs. You must keep all applicant and recipient information safe to prevent the use or disclosure of information. You must also report any misuse or improper disclosure of applicant information to DPA.

It is very important that applicants feel they can tell you private information about themselves and their family. You cannot share this information with anyone who does not work for DPA. Tell the applicant that only people who work for the Division of Public Assistance will see the information they give to you. If anyone else asks you for information about someone who applied for public assistance, tell the individual to call DPA directly.

If someone approaches you and says they work for DPA, ask to see an identification card that shows they work for State of Alaska, Department of Health and Social Services, or call the DPA office to ensure they are DPA employees.

2.2 Conflict Of Interest

As a fee agent you may need to process applications for members of your family, friends, and people you have known for a long time. It is important that any personal or business dealings you may have with applicants do not change the way you handle their applications.

If there are other fee agents available in the areas, refer your family, friends and people you have known for a long time to these fee agents. If there are no other fee agents in the area, you may interview your family, friends, and people you have known for a long time. However, if either you or an applicant feels there is some possibility of conflict of interest, you must make it clear to the applicant that they are not required to go through a fee agent to receive public assistance benefits. They can send their application directly to

the district office. Someone from the DPA office that serves your community will contact the applicant to conduct a telephone interview.

Note:

Fee agents applying for public assistance may not conduct an interview for themselves. They must send their application directly to the district office.

There are several State laws about conflict of interest. When individuals (including fee agents) use information they get through an official position for personal gain, they can be prosecuted for “conflict of interest.” A public servant or fee agent who is found guilty of this conflict commits a Class-A misdemeanor. Conviction of a Class-A misdemeanor could result in up to one year in jail or a fine of up to \$5,000, or both. Alaska Statutes 47.15.030, 11.56.850, and 11.81.900 explain conflict of interest.

2.3 How Fee Agents Are Paid

You get paid for each complete application that you send to the Division of Public Assistance (except for Denali KidCare and Senior Benefits, most applications require an interview to be considered complete). To get paid, you must complete and submit a Fee Agent Monthly Billing Report Form (FA 48) to the office that serves your area.

You will be paid only for complete applications listed on the Fee Agent Monthly Billing Report Form (FA 48). For programs that require an interview, you must have a Fee Agent Interview Report (FA 1) with each application in order to get paid. (Only Denali KidCare and Senior Benefits applications will be accepted as complete without the FA 1.)

Note:

Heating Assistance Program - Fee agents are also paid for Heating Assistance Program (HAP) applications they help complete, even though the HAP application is not listed on the Fee Agent Monthly Billing Report Form (FA 48). There is a separate billing process for HAP applications.

Directions for completing the Fee Agent Monthly Billing Report Form (FA 48) are on the back of the form. Before submitting the form, check to make sure you filled out the form completely with your signature and date. Mail, fax or scan the form to the district office. The district office must receive your Fee Agent Monthly Billing Report Form (FA 48) by the 10th of each month. If you are mailing your report, allow several days for mailing time.

The district office will review your report and check that the office received all applications you included in your report. If there are any questions about your report, processing of your payment may be delayed. After the review, the district office will send your report to the Statewide Fee Agent Coordinator in Anchorage for processing and submit it for payment. Checks will be issued from Juneau and will either be mailed to you or deposited to your bank account if you have signed up for direct deposit.

2.4 Training Fee Agents

Each office or region has assigned staff who work directly with fee agents. These staff members will train you on how to take applications, interview applicants, submit all necessary paperwork to the office, complete your monthly billing report form and order supplies.

Training may be done by phone, in person in your village, or at the office. The assigned staff will contact you and provide you with specific information on how you will get trained.

2.5 Office Supplies

Fee agents often need basic office supplies like:

- Pens
- Paper clips
- Tablets of paper
- Pinter paper
- Stamped envelopes
- Address stickers
- Fee agent certified stickers (for citizenship and identity documents)

DPA will provide you with these supplies, including prepaid postage on envelopes. When you need more supplies, call your local fee agent liaison at the local DPA office and provide the list of items you need. The Fee Agent Order Form (FA 9) is also available to you to request additional supplies.

The Division will not provide electronic equipment, like copiers or computers.

Chapter 3

How to Interview the Applicant

Most public assistance applicants must have an interview. If they fail to have an interview, the application will be denied.

Exception: *Denali KidCare and Senior Benefits program do not require an interview.*

The interview can be with a fee agent or by telephone with a caseworker. Some fee agents may be uncomfortable interviewing an applicant who is a relative or if they know the applicant is not telling the truth. If you have a problem with an interview, contact the local DPA office for help.

3.1 Applicants Who Do Not Speak English

If the applicant does not speak English and you cannot speak the applicant's language, the applicant can bring someone as an interpreter to the interview. If you and the applicant cannot find an interpreter, call the local DPA office for assistance with the interview.

3.2 Scheduling the Interview

To ensure an applicant participates in an interview:

- Always attempt to interview the applicant **the same day you receive the application**. If the applicant is not available for an interview the same day you receive the application, the interview must be completed by the following day.

Exception: *If the application is for Chronic and Acute Medical Assistance (CAMA), do not delay interviewing the applicant and sending in the application form. In many cases you may need to fax the application to the DPA office the same day you receive it. CAMA benefits cannot be paid until the month after a CAMA application is received in a DPA office.*

- If you cannot complete the interview by the day following the day you receive the application, tell the applicant that you will submit the application and other required forms to the local DPA office without an interview.

Note:

The applicant also has the option to mail the forms to the district office without an interview.

- If the applicant completes and leaves an application with you and does not return for their scheduled interview, send in the application to the local DPA office immediately.

3.3 Helping Applicants Complete the Application Form

Many people can complete the applications and forms with only a little help from you. However, some people may not understand some questions and you may need to provide assistance so applicants can fill out the application correctly. To assist applicants in completing the application form:

- Read Appendix C – Guide to the GEN 50 B. It contains information that helps explain the application.
- Do not write information on the application form. During the interview, if the applicant provides an answer that is different than the information reported in the application, provide an explanation on the Fee Agent Interview Report Form (FA 1).
- If an applicant is disabled or cannot read, ask them to bring a friend or family member who can help them.
- Make sure the application is complete. An application is considered complete when:
 1. All the questions are answered.
 2. The applicant signed the application form.
 3. The Fee Agent Interview Report (FA 1) is attached (except for Denali KidCare, Heating Assistance and Senior Benefits applications).

3.4 Interview Tips

Below are some helpful tips to get good information from the applicant at the interview:

- 1)** Listen to the applicant. Visit a little to help the applicant feel comfortable.
- 2)** Repeat the question if the applicant starts talking about something else.
- 3)** If the answer is not clear, repeat the answer by saying “Did I understand you to say...?”
- 4)** Restate the applicant's answers as they told them to you and allow him or her to correct you if you have misunderstood.
- 5)** Ask questions that the applicant cannot answer with a yes or no. This helps draw more information from the applicant.

- 6)** Let the applicant do most of the talking. Use words like, "I see; I understand; is there anything else? Tell me about..." Encourage the applicant to talk.
- 7)** Ask specific questions only after the applicant has given you all the information they can. This helps direct the interview.
- 8)** When an applicant starts to give you information on a question, be sure the question is fully answered and you have all the information you need before you go on to the next question.
- 9)** The applicant must explain where the family gets their money each month, the date they usually receive it and who gets it. This includes loans from their family, gifts, and winnings.
- 10)** The applicant must explain how they "get by" or pay bills if they say they do not have any income.
- 11)** The applicant must tell you about all the property they own, including snow machines, boats and land. If the property is for sale, Native Corporation Land or restricted land that cannot be sold without permission. Make sure to include that information on the Fee Agent Interview Report (FA 1) form.
- 12)** At the end, restate or do a summary of the information the applicant told you.

3.5 Completing the Fee Agent Interview Report (FA 1)

The fee agent records information from the interview on the Fee Agent Interview Report (FA 1). The fee agent may also use this form as a guide when conducting the interview. When the interview is completed, fill out the Fee Agent Interview Report (FA 1). When you sign this form, you are telling us you interviewed the applicant and you are satisfied that the information on the application form is complete and correct.

The instruction for completing the Fee Agent Interview Report (FA 1) is on the back of the form. A checklist is also provided. You must have a completed Fee Agent Interview Report (FA 1) in order to get paid for taking an application. Also, make sure you mail the entire Fee Agent Interview Report (FA 1) along with the application (except for Denali KidCare, Heating Assistance and Senior Benefits applications).

3.6 Finishing the Interview

When you finish the interview, provide the applicant the following information:

- Toll-free phone numbers

These phone numbers provide information on the applicant's case once the office processes the application. They can call to find out when their benefits will be mailed. They need their Social Security Number or Case Number to get the information, and the case must be open.

- 1-888-804-6330 - “Interactive Voice Response” number which is also known as the Benefit Hotline.
- 1-888-318-8890 - Denali KidCare toll-free number for families applying for DKC.
- 1-888-352 4150 – Senior Benefits toll-free number for seniors applying for Senior Benefits.
- 1-800-780-9972 – Medicaid Recipient Helpline for questions about Medicaid coverage.
- 1-888-997-8111 – Quest Card Customer Service for questions about their Alaska Quest Card or direct deposit.
- Benefits are sent out in many different ways:
 - Food Stamp benefits will be on the Alaska Quest Card.
 - Medical Assistance benefits, including Medicaid, CAMA, and DKC, will be either a DKC identification card or stickers sent in the mail.
 - Alaska Temporary Assistance cash benefits can be on the Alaska Quest Card or can be directly deposited into their bank account.
 - Senior Benefits and Adult Public Assistance cash benefits can be directly deposited into their bank account or can be a check sent to them in the mail.
 - General Assistance payments are sent by check to the vendor.
- Applicants will receive letters (also called notices) from the office telling them about their benefits. Advise the applicants to open and read all notices they receive from DPA.

3.7 Voter Registration

As a DPA fee agent, you need to inform the applicant about voter registration. Follow the steps below to ensure that voter registration is offered to DPA clients:

- Provide the applicant a voter registration packet which includes the NVRA Voter Preference Form (Would You Like to Register to Vote) and State of Alaska Voter Registration Application (pages 1 and 2).
- Ask the applicant to complete the NVRA Voter Preference Form to indicate if they would like to register to vote.
 - If the applicant declines and states that they do not want to register to vote, ask the applicant to check “NO” on the NVRA Voter Preference Form and, write their name and date.
 - If the applicant wants to register to vote, ask them to check “YES” on the NVRA Voter Preference Form and, write their name and date.

- Keep the NVRA Voter Preference Form and mail it to DPA along with the DPA application or recertification form.
- If the applicant wants to register to vote, they also need to complete the voter registration application. Once the form is completed, the applicant has the option of giving the completed voter registration application to you to be mailed to DPA along with their application for public assistance. The applicant also has the option of mailing the voter registration application to any of the Elections Office listed on page 2.

Chapter 4

Verifying Information

Each public assistance program requires some verification or proof to help determine if an applicant is eligible for benefits. As a fee agent, you are responsible for obtaining these documents and verifying all information required to complete a public assistance application.

4.1 Documents the Applicant Needs to Provide

The documents the applicant needs to provide are listed in the Application for Services (GEN 50B) – Information Page.

4.2 Obtaining Verification

The applicant must provide the documents needed to verify information. There are many ways to verify information. Some are better than others because they have a lot of information. For example, a birth certificate can verify the name, date of birth, and if they are related to the applicant. The Application for Services (GEN 50B) includes the types of verification that the applicant might need to submit with their application.

Missing verification can delay the decision on the application. It is advisable to ask applicants to bring the verification with them at the time of their interview. If you do not receive the verification or proof at the time of the interview, do not hold the application for the applicant to bring in the document(s). Send the application to the local Division of Public Assistance office without the document(s). Write on the Fee Agent Interview Report (FA 1) that the applicant did not bring in verification or proof.

If you have to mail in the verification or proof after mailing the application, make sure to put the applicant's name on the documents.

4.3 Sending Original Documents to the Office

If original documents, like pay stubs (or proof of income), are mailed in with the application, the caseworker will make copies and return the original documents to the applicant.

4.4 Sending Copied Documents to the Office

If possible, have the applicant provide copies of documents, especially legal documents such as passports, alien registration cards, or other immigration documents that the applicant need to keep with them. Fee agents are not responsible for making copies for the applicant.

Remember, it is illegal to copy some documents. If the original document says that it is illegal to photocopy, you need to write on the Fee Agent Interview Report (FA 1) the following:

- Name of the document
- Document number (if there is one)
- Date on the document
- What is verified
- Statement that you saw the original

Note:

For Medicaid and Denali KidCare, verification of citizenship and identity must be obtained from original documents or certified copies from the issuing agency. Uncertified copies, including notarized copies are not acceptable. Although some documents contain a statement, "DO NOT COPY", the applicant or recipient may copy these documents for the official purpose of establishing Medicaid eligibility.

4.5 Viewing Documents for Medicaid and Denali KidCare

Medicaid and Denali KidCare applicants have the option of presenting original or certified copy of their citizenship or identity documents to fee agents. DPA provides you with green labels that you can attach to copies and validate with your signature. If an applicant wants to have original or certified copies verified by you, the following steps must be taken:

- The applicant must show you their original or certified copy of the identity and citizenship document.
- The applicant must also show you a copy of the document(s).
- After viewing the original or certified copy, attach a green label on the photocopy that will be submitted. If the applicant presents a photocopy containing more than one document, only one green sticker per page of photocopied documents is necessary as long as all originals are viewed.
- Sign the label and write "FA" beside your signature, and enter the date you viewed the original or certified copy.
- If a green label is not available, put your signature directly on the copy, write "FA" beside your signature and the date you viewed the original or certified copy.

- Mail the verified citizenship and identity copy along with other required documents and the application to DPA.

Examples of citizenship and identity documentation:

The following table shows a list of allowed documentation for verifying U.S. citizenship and identity. If applicants do not have any of the documents listed, the applicant may still apply for Medicaid or Denali KidCare. You need to send the application to the nearest DPA office or Denali KidCare office in Anchorage. DPA staff may be able to assist the applicant in obtaining other types of acceptable documentation.

Acceptable Documents for Both Proof of Citizenship and Identity

- U.S. Passport
- U.S. Naturalization Certificate (Forms N-550 or N-570)
- Certificate of Citizenship (Forms N-560 or N-561)
- Certificate of Degree of Indian Blood, or other U.S. American Indian/Alaska Native Tribal document which contains a photograph or other identifying information

If applicants do not have any of the documents listed above, the following documents may be used to prove U.S. Citizenship and identity. Applicants will need to provide one item from each column as listed below:

Acceptable Documents for Proof of Citizenship	Acceptable Documents for Proof of Identity
<ul style="list-style-type: none"> • U.S. Birth Certificate • Certification of Report of Birth (Forms FS-545 or DS-1350) • Report of Birth Abroad of a U.S. Citizen (Form FS-240) • U.S. Citizen ID Card (Forms I-179 or I-197) • American Indian Card (I-872) issued by the Department of Homeland Security with the classification code "KIC" • Final adoption decree • Evidence of U.S. Civil Service employment before June 1, 1976 • U.S. Military Record showing a U.S. place of birth, such as a DD-214, or similar official document that shows a U.S. place of birth • Extract of hospital record of birth on hospital letterhead • Medical (clinic, doctor, or hospital) record created at least 5 years before the initial application date that indicates a U.S. place of birth. • Institutional admission papers from a nursing home, skilled care facility, or other institution that were created at least 5 years before the initial application date that indicates a U.S. place of birth. 	<ul style="list-style-type: none"> • U.S. Driver's license with photo • Identification card issued by the federal, state, or local government • School identification card with a photograph of the individual • U.S. military card or draft record • Military dependent's identification card • U.S. Coast Guard Merchant Mariner card • Three or more corroborating documents such as tax statements, high school diplomas, and marriage certificates • For children under age 16: <ul style="list-style-type: none"> ✓ Application for Medicaid signed under penalty or perjury by a parent or guardian may be accepted as proof. ✓ A school record, school ID, or report card ✓ A day-care or nursery school record

4.6 Requiring Social Security Numbers

An applicant and everyone in the applicant's household applying for Alaska Temporary Assistance, Medicaid, and Food Stamps must list their Social Security Number on the application, or they must have applied for a number. If they applied for one, note on the Fee Agent Interview Report (FA 1) form the date they applied. Most parents apply for a child's Social Security Number when the child is born.

Chapter **5**

Public Assistance Programs

The Division of Public Assistance administers and determines eligibility for programs to help needy Alaskans with cash, food, heating assistance, and medical assistance. The programs administered by DPA are:

- **Adult Public Assistance (APA)**
- **Alaska Temporary Assistance Program (ATAP)**
- **Chronic and Acute Medical Assistance (CAMA)**
- **Food Stamp Program (FS)**
- **General Relief Assistance (GRA)**
- **General Relief Burial (GR Burial)**
- **Medicaid (ME)**
- **Senior Benefits Program**
- **Heating Assistance Program (HAP)**

5.1 Public Assistance Information on the Internet

The Department of Health and Social Services maintains a website for information on all Divisions in the Department, including the Division of Public Assistance and the Division of Health Care Services. If you or the applicant has Internet access, the following websites provide helpful program information on all public assistance and medical assistance programs.

<http://www.hss.state.ak.us/dpa/>
<http://www.hss.state.ak.us/dhcs/>
<http://www.hss.state.ak.us/>

The Division of Public Assistance web page has information about each program. The Food Stamp Program also has an “eligibility calculator” where applicants can enter information about their monthly income and expenses to see if they might qualify.

Note:

*The eligibility calculator is a simple test and it does not apply all Food Stamp rules.
The only way for a household to know for sure if they are eligible is to complete the
application and send it to DPA.*

The Division of Health Care Services (DHCS) web page has information explaining the many types of coverage under the Medicaid program.

Chapter **6**

Reporting Changes

Food Stamps, Medicaid, APA, and Alaska Temporary Assistance Programs each have different reporting requirements.

You, as a fee agent, may not report changes for a household. Instead, give each applicant a copy of the pamphlet called Reporting Changes (GEN 93) and the Change Report Form (GEN 55). The Reporting Changes (GEN 93) pamphlet explains the reporting requirements for each program and the Change Report Form (GEN 55) is a form that applicants can use to report the change.

Give each applicant the toll-free number for the office that processed the application. The applicant may call this office with changes they must report. The applicant may also mail the GEN 55 form to this office.

If an applicant did not report a change that is listed in the Reporting Changes (GEN 93) pamphlet and a mistake in benefits is made, the applicant will have to pay back the benefits. This can mean decreasing the applicant's monthly cash or Food Stamp benefits, or taking their Permanent Fund Dividend check until the amount is paid back.

Appendix A – District Offices

Anchorage District Office 400 Gambell Street Anchorage, AK 99501 Toll Free : 1-888-876-2477 Phone : (907) 269-6599 Fax : (907) 269-6450	Heating Assistance Program 400 Willoughby, Suite 301 Juneau, AK 99801 Toll Free: 1-800-470-3058 Phone: (907) 465-3010 Fax: (907) 65-3319	Kotzebue District Office PO Box 1210 Kotzebue, AK 99752 Toll Free: 1-800-478-3451 Phone: (907) 442-3451 Fax: (907) 442-2151
Bethel District Office PO Box 365 Bethel, AK 99559 Toll Free: 1-800-478-2686 Phone: (907) 543-2686 Fax: (907) 543-2650	Homer District Office 3670 Lake Street, Suite 200 Homer, AK 99603 Toll Free: 1-877-235-2421 Phone: (907) 226-3040 Fax: (907) 235-6176 Toll Free Fax: 1-888-235-6355	Mat-Su District Office 855 W Commercial Drive Wasilla, AK 99654 Toll Free: 1-800-478-7778 Phone: (907) 352-7612 Fax: (907) 357-2538 Toll Free Fax: 1-877-357-2538
Coastal Field Office 3601 C Street, Suite 410 PO Box 2400249 Anchorage, AK 99503 Toll Free : 1-800-478-4372 1-800-478-4364 Phone: (907) 269-8950 Fax: (907) 562-1619 Toll Free Fax : 1-888-266-1619	Juneau District Office 10002 Glacier Hwy, Suite 200 Juneau, AK 99801 Toll Free : 1-800-478-3537 Phone : (907) 465-3537 Fax : (907) 465-4657	Muldoon Job Center 1251 Muldoon Road, Suite 111B Anchorage, AK 99504 Toll Free : 1-888-876-2477 Phone: (907) 269-0001 Fax: (907) 269-6029
Denali KidCare Office PO Box 240047 Anchorage, AK 99524-0047 Toll Free: 1-888-318-8890 Phone: (907) 269-6529 Fax: (907) 269-0987 or (907)269-4612	Kenai District Office 11312 Kenai Spur Hwy, Suite 2 Kenai, AK 99611 Toll Free: 1-800-478-9032 Phone: (907) 283-2900 Fax: (907) 283-6619 Toll Free Fax : 1-888-248-6619	Nome District Office PO Box 2110 Nome, AK 99762 Toll Free: 1-800-478-2236 Phone: (907) 443-2237 Fax: (907) 443-2307 Toll Free Fax: 1-888-574-2307
Eagle River Job Center 11723 Old Genn Hwy #B-4 Eagle River, AK 99577-7595 Mailing Address: 400 Gambell Street, Anchorage, Alaska 99501 Toll Free : 1-888-876-2477 Phone: (907) 694-7006 Fax: (907) 694-1490	Ketchikan District Office 2030 Sea Level Dr, Suite 301 Ketchikan, AK 99901 Toll Free: 1-800-478-2135 Phone: (907) 225-2135 Fax: (907) 247-2135	Senior Benefits Office 855 W Commercial Drive Wasilla, AK 99654 Toll Free: 1-888-352-4150 Phone: (907) 352-4150 Fax: (907) 357-2561 Toll Free Fax: 1-866-352-8539
Fairbanks District Office 675 7 th Avenue, Station D Fairbanks, AK 99701 Toll Free: 1-800-478-2850 Phone: (907) 451-2850 Fax: (907) 451-2923 Toll Free Fax: 1-877-451-2923	Kodiak District Office 307 Center Street Kodiak, AK 99615 Toll Free: 1-888-480-3783 Phone: (907) 486-3783 Fax: (907) 486-3116 Toll Free Fax: 1-888-281-3116	Sitka District Office 201 Katlian St, Suite 107 Sitka, AK 99835 Toll Free: 1-800-478-8234 Phone: (907) 747-8234 Fax: (907) 747-8224

DPA REGIONS

Northern Region:

- Fairbanks District Office
- Kotzebue District Office
- Nome District Office

Coastal Region:

- Denali KidCare Office
- Bethel District Office
- Kodiak District Office
- Homer District Office
- Kenai District Office
- Coastal Field Office

Central Region:

- Senior Benefits Office
- Anchorage District Office
- Muldoon Job Center
- Eagle River Job Center
- Mat-Su District Office

Southeast Region:

- Juneau District Office
- Ketchikan District Office
- Sitka District Office
- Heating Assistance Program Office

Appendix B - Definitions

TERM	DEFINITION
APPLICANT	A person who completed a Public Assistance program application form.
AUTHORIZED REPRESENTATIVE	A person chosen by the applicant to apply for or act on behalf of the applicant.
CASE WORKER	A person in the Division of Public Assistance office who reviews and processes applications, approves and authorizes monthly benefits and supportive services. Sometimes called an eligibility technician or ET.
CASH ON HAND	The total amount of cash all the people in the household have available to them, including checks and money orders that have not been cashed.
CLIENT	A person who applies or receives a benefit from a Public Assistance program.
CONFIDENTIAL	Something told in private; information between the applicant and public assistance workers cannot be shared with anyone else.
CRAFTS	Handmade items, such as baskets, artwork, ivory and woodcarvings; knit sweaters and mittens, beadwork, and moccasins.
DISABLED	Means a person has an injury or sickness that will keep him or her from working.
EARNED INCOME	Money received when someone works, including self-employment and fishing.
ELECTRONIC BENEFIT TRANSFER (EBT)	A system that electronically issues benefits to an account established for a DPA client, also known as the Alaska Quest Card.
ELIGIBLE	A household or applicant who meets all program requirements.
HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA)	Federal law that requires all applicants to sign a release of information before any medical information can be shared. This includes obtaining information needed to process a Medicaid payment.
HOUSEHOLD	A group of related or unrelated persons who are living together. Under Food Stamp Program rules, a household buys food and prepares meals together.
IDENTIFICATION (ID)	Proof or verification of a person's name, such as a driver's license.
INCAPACITY	A temporary illness, injury, or disability that prevents someone from working and supporting himself or herself and his or her family.
INCOME	Any money received during the month
INELIGIBLE	When the applicant does not meet the requirement for receiving public assistance.
MEDICARE	Medical insurance that pays medical bills for nearly everyone age 65 or older, regardless of income. This program is part of the Social Security benefit. This is not a Public Assistance program.
MINOR PARENT (TEEN PARENT)	A person who is unmarried and has a child, is under the age of 18, and has parents or guardian responsible for him or her.
MORTGAGE PAYMENT	A payment on a loan used to buy a home or property.
NONCUSTODIAL PARENT	A parent who does not live with their child, also called an "absent" parent.
RECIPIENT	A person or household who receives benefits from one or more Public Assistance programs.
REPORTABLE CHANGE	A type of change that the client <u>must</u> report within 10 days. The types of changes that must be reported are listed on the Reporting Changes (GEN 93) pamphlet.

TERM	DEFINITION
RESIDENCE ADDRESS	Where the applicant or recipient lives. It is not always the same as a mailing address.
RESOURCE	An asset. Land and buildings are resources. Some other things considered as resources are fishing permits, four wheelers, snow machines, outboard motors, pickups, cars, planes, livestock, tools and equipment, savings, savings bonds, and cash.
ROOM AND BOARD	Money given or received for food and a place to stay.
SEASON	A period of the year when a special activity takes place. Some people work only for a season each year, like fishing, tourist, and building seasons
SELF-EMPLOYMENT	When you work for yourself instead of a company or government agency. Selling Avon, fish or crafts, being a fee agent, baby-sitting, gold mining, trapping, and owning a store are all types of self-employment.
SEMI-ANNUAL REPORTING	A reporting requirement for most Food Stamp households.
SEPARATE HOUSEHOLD	An individual who lives with other people but buys food and prepares meals separate from others. This status can only be given to certain Food Stamp households. All people living in the household must be written on the application, whether they are eating together or not. The Public Assistance office will determine whether they must be included in the Food Stamp case.
SHELTER COSTS	Rent or mortgage payments, utilities, heating oil, property taxes, and homeowners insurance
SOCIAL SECURITY	A benefit given to disabled or retired workers and their family members, including survivors of deceased workers. The past earnings of the worker or their spouse determine the amount. The Social Security Administration administers it, and the applicant does not have to be needy or low-income.
SPOUSE	A husband or wife.
SUPPLEMENTAL SECURITY INCOME (SSI)	A federal cash assistance program for needy low-income persons who are aged, blind, or disabled. The federal Social Security Administration administers it. Children or adults can be eligible for this program.
UNEARNED INCOME	Money received without working for it, such as child support, Permanent Fund Dividends, pensions, Social Security, unemployment, winnings, loans, and money received from other people.
UTILITIES	Household expenses, which include electricity, gas, oil, sewer, water, garbage, and telephone services
VALUE	The amount of money a resource or property is worth
VERIFICATION	Proof that statements or claims made by applicants and recipients are true.
VERIFY	To provide proof that statements or claims are true.

Appendix C – Guide to the Application for Services (GEN 50B)

This Guide covers some questions on each page of the Application for Services (GEN 50B). Use the Application for Services (GEN 50B) for anyone applying for:

- Food Stamps
- Medicaid, except for Denali KidCare (see the note below)
- Adult Public Assistance
- General Relief Assistance
- Alaska Temporary Assistance
- Chronic and Acute Medical Assistance

Note:

Use the Denali KidCare Application (GEN 132) for pregnant women and children under age 19.

Use the Application for Heating Assistance (Form 06-3637) when the applicant wants to apply for Heating Assistance.

Important Things to Remember:

- Tear out the Information Page, give it to the applicant and ask the applicant to read it. This page provides information about applying for public assistance.
- Tear out the Rights and Responsibilities pages give them to the applicant, and ask the applicant to read them. These pages provide information about their rights and responsibilities and specific information on what would happen if they give false, incorrect, or incomplete information to get or try to get public assistance benefits.
- All questions on the Application for Services (GEN 50B) must be answered for it to be complete. If the applicant does not know the information, they should write, “don’t know” as the answer. If a question does not apply, they should write “N/A” (not applicable) for the answer. If they leave an answer blank, ask them about it during the interview. You might be able to help them understand and answer the question.
- The most common reasons for delays in processing an application is incomplete information and missing proof of income and expenses. The items the applicant needs to provide are listed on the Information Page. The items are organized by program.

Page A (Application for Services)

In the small box on the upper right hand corner, sign your name and write the date you received the completed application where it says “Fee Agent – date rcvd/signature.” The DPA worker will fill in the other space.

Question A: What kind of help do you need?

- Refer the applicant to the list of programs in the column on the right for more information about the programs.
- Instruct the applicant to put a check mark in the box beside the program or programs and other services they need.

Question B: Who are you?

- Home Address/Directions to their home: this means, “Where is the house they live in?” If they do not have a street address with a house number, have the applicant write a description of the house and how to find it, such as “third house past the store.”
- If the applicant is applying for Food Stamp benefits, the person must also answer the three questions to see if they can get Food Stamp benefits right away.
- The applicant must sign and date the application.

Page B (Notes)

Instruct the applicant to use this page to write additional information they want to provide to the caseworker.

Page 1 (People in your household)

Question 1:

- List the name of each person living in the house. Remind the applicant they need to provide the name of every individual living in the household and their relationship to the individual.
- Applications for Alaska Temporary Assistance, Medicaid, and DKC: If there is a parent who does not live with the child, you will need to get a “Child Support Information” form (CSSD 1603) for each parent. If the parent is deceased, the applicant needs to write “deceased” on the CSSD 1603 form.

- Include the information for anyone who is usually in the house, but is temporarily gone, such as out fishing or visiting grandparents in another town. Be sure the applicant explains where they are, why, and when they will return on Page B (Notes). You may also provide this explanation on the FA 1.
- Make sure the applicant lists a date of birth and Social Security Number for each person applying for benefits. Usually only newborn babies do not have a number, and most parents apply for one when the baby is born. The Social Security Administration (SSA) gives a "Receipt of Application for SSN" form to everyone who applies for a number, so the applicant may have it as proof if the person applied for a number. If they do not have proof that they applied for a number, write down the date they applied on the Fee Agent Interview Report (FA 1).
- Be sure the applicant answers questions about school or education.
- Race and ethnicity is optional. If the applicant decides to provide this information, use the legend provided on the bottom of the box.

Question 2:

If the applicant received public assistance in Alaska or any other state, they should answer "yes." Ask the name of the city and state, when they received the assistance, and what name they used. The applicant should write this information down on the application.

Question 3:

If the applicant or someone in the house is pregnant, they should list the information about when they expect the baby (due date). The health care provider (doctor, nurse, or midwife) can give the applicant a signed form as proof.

Question 4:

The applicant must provide an answer to this question. If this question is marked "yes", the caseworker may contact the applicant for additional information.

Question 5:

The applicant must provide an answer to this question. If this question is marked "yes", the caseworker may contact the applicant for additional information.

Question 6:

If anyone in the household is enrolled in a college or university (including distance delivery or online classes), instruct the applicant to write down the name of the household member.

Page 2 (Income in your household)

Question 7:

The applicant must list the name of *each person* who works and provide the name of their employer, the number of hours they usually work in a week, and the amount of their hourly wage or monthly salary. Include all children who work. Remind the applicant that all income must be reported, even for the children in the house.

During the interview you will need to ask for:

- A copy of recent pay stubs showing gross wages. Applicant's income is often based on an average of gross wages. It is most helpful if they can give you two or three of their most recent paystubs instead of just one.
- If the applicant expects any changes to the amount they earn, how much, and why.

If they just started a job or have a pay raise, then they probably will not have pay stubs that show their earnings. Put that information on the Fee Agent Interview Report (FA 1).

Question 8:

The applicant must report if anyone in the household had a job that ended in the last 60 days.

Question 9:

If someone in the house is self-employed, the applicant will need to provide proof of their self-employment. This can be written, such as Schedule C of the IRS income tax return or business records. Verbal confirmation is also accepted. Let the applicant know that the case worker might contact them for further information about their gross income, business expenses and months they do their self-employment.

Page 3 (Questions about your household)

Question 10:

The applicant needs to list other sources of income besides employment and self-employment. Do not include earned income, self-employment, pay or wages in this section. The applicant needs to give you proof of the amount, like a receipt or a letter. If they do not have proof, write on the FA 1 that the applicant does not have proof. If they have a name and phone number of a person who can give proof, the applicant can write them on either "Notes" page (Page B or Page 8), or you can write it on the FA 1.

Question 11:

The applicant needs to report if they expect any changes in any of the income or employment they reported. Also, if anyone in the household expects to receive any new income, it must be reported.

Question 12:

The applicant needs to report if anyone in the household works or gets help with food, shelter, utilities, or other expenses that are not paid in cash. The applicant must provide an explanation on the type of help they are receiving for the work or service they provide.

Question 13:

The applicant needs to report if anyone in the household owns any property, the type of property owned (including properties that are inherited), its estimated value, and amount owed. Ask the applicant if the property is the household's primary residence, a rental property, vacation house, or if it is for sale. Ask the applicant to provide proof of ownership.

Page 4 (Questions about your household)

Question 14:

The applicant must list all vehicles that they are buying or already own, including fishing boats, and snow machines, and if they own it or own it with someone else (joint ownership). The applicant must also list vehicles that are not running or unused. List the type of vehicle, such as "Honda 250," the year, and how much they owe on it. During the interview, ask if the vehicle runs or not. If it doesn't run, the applicant should note that on the application, or you can put the information on the FA 1 form.

Question 15:

The applicant needs to list the amount of money they have in cash, a bank, a credit union, certificate of deposits, or other types of checking or savings accounts. The applicant must answer for everyone applying for help, including children. Ask if it is a joint bank account (more than one person's name on the account). If the current bank account balance is not listed on the application, ask the applicant to write it. Also, inform the applicant that if a bank statement is needed, the eligibility technician will request for it.

Question 16:

The applicant needs to list any resources such as vehicles or real estate that they sold, gave away, or transferred in the past five years.

Page 5 (House and Shelter Expenses)

Questions 17 - 19:

The applicant must list the portion they are obligated to pay for rent or mortgage and their utilities, such as propane, electricity, and oil costs. Many applicants need the fee agent to help them understand these questions. You might have to have them write more information on the "Notes" page (Page 8), or you will need to explain on the FA 1 form how the applicant pays rent if they do not have money.

If they own their house, ask if they have tax and insurance statements. If they pay a mortgage (house payment), then ask if taxes and insurance are part of the house payment.

Question 20:

If another person or agency helps the applicant with their shelter cost, the applicant must write down the name of the person or agency, the expense being paid, and amount.

Page 5 (Other Household Expenses)

Question 21:

The applicant must list any child care or adult care they must pay so they can work, look for work, or go to school. They must have a receipt or letter from the care provider for proof. If they receive child care assistance, the applicant should only list the amount of the child care that the household must pay. The proof should have information about the name of the child or adult receiving the care, the dates, and the amount of the child care or adult care payment.

Question 22:

Ask about child support payments that they pay. If someone pays or expects to pay child support, they need to provide court papers for proof of how much they have to pay each month.

Question 23:

Ask about medical expenses incurred by someone in the household who is disabled or age 60 or older. If there are medical expenses, ask the applicant to provide proof.

Page 6 (Medical Information)

* The applicant needs to answer questions 24 - 29 only when applying for medical assistance.

Question 24:

Sometimes Medicaid can pay unpaid medical bills for the past three months. The applicant should list the name of the person who incurred the bill and the month(s) the medical service was provided. Also, ask the applicant to provide proof of income and resources for these months. Medicaid only pays if the bill is “unpaid.”

Question 25:

Have the applicant list any medical problems caused by an accident or injury, the person involved in the accident, and the date the accident occurred.

Question 26:

Ask the applicant to provide a copy of their medical or health insurance card, or provide the name of the insurance, address, policy number and type of insurance on the application.

Question 27:

Ask the applicant if there are any changes in health insurance coverage. For example, if someone in the household has insurance through employment and is losing their employment and insurance coverage.

Question 28:

If anyone in the household had health insurance that was cancelled or stopped within the past 12 months, the applicant needs to provide an explanation.

Question 29:

Have the applicant list the name and place of birth for all children under age 16 living in the home.

Page 7 (Signature Page)

Question 30:

An authorized representative is someone who can help the applicant to apply for benefits. An authorized representative is not required to live in the same household with the applicant. When the applicant names an authorized representative, they give permission for that person to help them and for the caseworker to talk to the representative if they have any questions about the application.

Note:

Fee agents cannot be authorized representatives unless they have special approval from the Division of Public Assistance.

Question 31:

An alternate payee is different than an authorized representative. It means that the person listed can cash benefit checks or use the applicant's Quest Card to buy things for the applicant. If the applicant wants someone as an alternate payee, they need to mark the box for Cash or Food, or both boxes. This person often is a spouse, but it could also be a trusted friend, adult child, parent, or other family member.

Question 32:

Food Stamp benefits can be used to buy subsistence equipment purchases in some communities in Alaska. Check with the caseworker to see if your community is listed as one where residents can make subsistence equipment purchases. The purchases must be made at a store that accepts Food Stamp benefit. Refer to How to Use Your Food Stamps (FSP 80) form.

Question 33:

The applicant must sign the "Statement of Truth." If they are applying for Alaska Temporary Assistance or Medicaid and there is a second parent, the second adult must also sign the application.

Page 8 (Notes)

The applicant can use this blank page called "Notes" to write other information about the size of their household, income, and expenses that the caseworker will need to know to make a decision on the application. Some types of information they should write down:

- If they expect someone to move in or out of the house.
- How they pay expenses (or if they haven't paid them) when they do not have income listed.
- If they expect to move to another house, village, or state.
- If someone applied for tribal assistance (including Native Family Assistance, BIA General Assistance, and FDPIR), Social Security, unemployment, or other benefits but haven't heard anything yet.

DPA put this blank page in the application to give the applicant some writing space for more information they need to tell us.

DPA workers and fee agents cannot write on the application. This section is only for the applicant. If you have additional information, provide it on the Fee Agent Interview Report (FA 1).

Authorization for Release of Information (GEN 36)

Use a separate Authorization for Release of Information (GEN 36) form if there are more than two adults in the household.

Contact People and Organizations (GEN 37)

Listing contact persons and organizations gives the caseworker information they need to finish the application. This is especially important when the applicant doesn't have all the proof they need for income and expenses. The name and daytime phone number for persons #1 and #2 should be someone living in the same community. It could be a neighbor, babysitter, or someone else who does not live with them.

Appendix D – Forms and Supplies List

* An "X" indicates that the form is applicable to the program

FORMS / SUPPLIES	APA	ATAP	CAMA	FS	GRA	GRA Burial	ME	DKC	SB
Alaska Medicaid Recipient Services Handbook	DPA has a limited supply of this handbook. The copy that DPA sends to fee agents is for the fee agent's use and not for distribution to applicants. If an applicant wants to receive a copy of the handbook, they may call Health Care Services at 1-800-780-9972, or go to the web at : http://www.hss.state.ak.us/dhcs/medicaid_medicare/news_medicaid/MedicaidRecipientHandbook1.pdf								
Application for Services (GEN 50B)	X	X	X	X	X	X	X		
Authorization for Reimbursement of IA (GEN 142)	X								
Child Support Information (CSSD 1603a) * for each noncustodial parent		X					X	X	
Denali KidCare Application (GEN 132) or Renewal form (GEN 75)								X	
Senior Benefits Application (GEN 152)									X
Direct Deposit Enrollment	X	X							
DKC/Medicaid Verification Stickers (Green Stickers)							X	X	
Eligibility Review Form (GEN 72)	X	X		X			X		
Employment Planning Information (ATAP 5)		X							
Fair Hearings (GEN 84)	X	X	X	X	X	X	X	X	
Fee Agent Interview Report (FA 1)	X	X	X	X	X	X	X		
FS - How to Use Your Food Stamps (FSP 80)				X					

FORMS / SUPPLIES	APA	ATAP	CAMA	FS	GRA	GRA Burial	ME	DKC	SB
Food Stamp Household Statement Agreement (FSP81)				X					
GRA Cremation/Burial Application (06-3690)						X			
Heating Assistance Application									
Pregnancy Verification Form (GEN 30)		X					X	X	
Preliminary Examination For Interim Assistance (AD 2)	X								
Report of Change (GEN 55)	X	X	X	X			X	X	
Reporting Changes Pamphlet (GEN 93)	X	X	X	X			X	X	
Statement of Relationships (GEN 7) * for each adult male unrelated to the children in the home		X					X	X	

FORMS AND SUPPLIES AVAILABLE UPON REQUEST:

FORMS / SUPPLIES	APA	ATAP	CAMA	FS	GRA	GRA Burial	ME	DKC	SB
Your Alaska Quest Card	X	X		X					
Denali KidCare Brochure								X	
More Money in Your Pocket - It Pays to Work!		X							
Your Best Bet – Avoid the Penalty		X							

FORMS / SUPPLIES	APA	ATAP	CAMA	FS	GRA	GRA Burial	ME	DKC	SB
Help Us Stop Fraud – Information You Need to Know About Fraud	X	X	X	X	X	X	X	X	
Food Stamps Make America Stronger (FSP 313)				X					
Medicaid Requirements for US Citizens (MED 9)							X	X	
Voter Registration Application (CO 3)	X	X	X	X	X	X	X	X	X

Appendix E – Fee Agent Interview Report (FA 1)

State of Alaska
Department of Health & Social Services
Division of Public Assistance

Fee Agent Interview Report

Applicant Name _____ Applicant's SSN _____
Fee Agent Name (print) _____ FA Contact Number _____
Fee Agent Email Address _____ Interview Date _____

The Client Applied For:

- ☐ Food Stamps ☐ Medicaid ☐ General Relief
☐ Alaska Temporary Assistance ☐ Adult Public Assistance ☐ CAMA

Application Information

1. Write the name of the person(s) who attended the interview: _____
2. Are there any persons living in the home who are not listed on the application? ☐ Yes ☐ No
If yes, list the names and relationships: _____

3. Is there anyone who usually lives in the house, but is away from the home? ☐ Yes ☐ No
If yes, list the name(s), the reason they are away from home, and the expected date to return home. _____

4. When was the applicant's most recent arrival in Alaska? _____
5. Is anyone living in the household a member of a federally recognized tribe? ☐ Yes ☐ No
If yes, what is the person's name? _____
6. Has any household member's work stopped or ended within the last 60 days? ☐ Yes ☐ No
If yes, list the name of the person whose job ended, when it ended, why it ended, and the name and phone number of the employer. _____

What date was the last check received or expected to be received? _____
7. Does the applicant currently have an Alaska Quest Card? ☐ Yes ☐ No
8. Did the household report living expenses? ☐ Yes ☐ No
Check the boxes where the client brought you proof:
☐ Rent/Mortgage ☐ Space Rent ☐ Telephone ☐ Water/Sewer ☐ Electricity ☐ Propane/Gas ☐ Oil
☐ Wood/Coal ☐ Property Tax ☐ Home Insurance ☐ Child Support ☐ Child Care ☐ Medical Care/Medicine

9. Explain how the household has been supporting itself before applying for assistance. If the applicant claimed "no income," explain how the expenses have been paid, or note that they are due or unpaid.

10. If applying for CAMA, please list the specific medical need and provide the name of the doctor and phone number:

Other Information or Comments

Fee Agent Signature _____ Date _____

Fee Agent Name (print) _____ FA Contact Number _____

Fee Agent Interview Checklist

1. Is an application or a recertification/review attached to this form? ☐ Yes ☐ No
 2. Did the applicant sign and date the application and all other forms needing signature? ☐ Yes ☐ No
 3. Did you, as Fee Agent, sign and date the application? ☐ Yes ☐ No
 4. Did the applicant provide proof of identification? Example: Photo ID, Driver's License, School ID ☐ Yes ☐ No
 5. Did you get proof of all income reported in the application?
Examples: Wages (including part-time and on-call work), tips, fishing income, unemployment, Social Security benefits, child support received, Veterans benefits, self-employment, student income, carving, weaving, sewing, crafts, National Guard pay, Native cash assistance programs, meeting stipends, loans, and cash gifts. ☐ Yes ☐ No
 6. Are all the household members' social security numbers listed on the application? ☐ Yes ☐ No
 7. For any household member who is not a US Citizen, was proof of alien status provided? ☐ Yes ☐ No
 8. Did you explain the rights and responsibilities to the applicant? ☐ Yes ☐ No
 9. Did you give the applicant a copy of the Rights and Responsibilities form (GEN 51)? ☐ Yes ☐ No
- Answer questions 10 – 12 if the applicant is applying for Medicaid:**
10. If the application is for pregnant woman, did you get proof of pregnancy and due date? ☐ Yes ☐ No
 11. Did you verify copies of identity and citizenship, by seeing the original or certified copy? ☐ Yes ☐ No
 12. Did the applicant complete a Child Support Information form (CSSD 04-1603a) for each parent not in the home? ☐ Yes ☐ No
- Answer questions 13 – 17 if the applicant is applying for Alaska Temporary Assistance:**
13. If the application is for pregnant woman, did you get proof of pregnancy and due date? ☐ Yes ☐ No
 14. If available, did the applicant provide copies of birth certificates or adoption decrees for all children? ☐ Yes ☐ No
 15. If available, did the applicant provide copies of marriage certificates, divorce decrees, or child support order? ☐ Yes ☐ No
 16. Did the applicant complete a Child Support Information form (CSSD 04-1603a) for each parent not in the home? ☐ Yes ☐ No
 17. Did the applicant complete the Direct Deposit form (if they preferred)? ☐ Yes ☐ No
- Answer question 18 if the applicant is applying for General Assistance:**
18. Did the applicant provide a copy of the eviction notice, landlord statement, or utility cut-off notice? ☐ Yes ☐ No
- Answer questions 19 – 22 if the applicant is applying for Adult Public Assistance:**
19. If the applicant has not been approved from Social Security Disability or SSI, did you give the applicant a Preliminary Examination for Interim Assistance Form (AD 2)? ☐ Yes ☐ No
 20. If the applicant wants to apply for Interim Assistance, did the applicant complete an Authorization for Reimbursement of Interim Assistance form (GEN 142 – IAR)? ☐ Yes ☐ No
 21. Did the applicant complete an Authorization for Release of Protected Health Information form (GEN 150)? ☐ Yes ☐ No
 22. Did the applicant complete the Direct Deposit form (if they preferred)? ☐ Yes ☐ No

Directions for completing the Fee Agent Interview Report form:

Page 1 and 2

- Clearly note the applicant's name, SSN, your name, your contact number, your email address if you have one, and the interview date.
- Mark the program(s) the applicant is applying for.
- Answer all ten questions under "Application Information."
- If you have more information or if you know the client did not give you all the correct information, make a note under "Other Information or Comments."
- On the bottom of page 2, make sure to sign and date the form. Also, print your name and write your contact number.

Page 3 (Fee Agent Interview Checklist)

- Make sure that you review each question and provide a yes or no answer to each question that applies to the applicant:
 - Answer questions 1 – 9 for all applicants
 - Answer questions 10 – 12 only if the applicant is applying for Medicaid
 - Answer questions 13 – 17 only if the applicant is applying for Temporary Assistance
 - Answer question 18 only if the applicant is applying for General Assistance
 - Answer question 19 – 22 only if the applicant is applying for Adult Public Assistance

Remember to mail the entire FA 1 form (which includes pages 1, 2, and 3) along with the application.

Appendix F – Fee Agent Monthly Billing Report Form (FA 48)



State of Alaska
Department of Health & Social Services
Division of Public Assistance

District Name _____

Report Month _____

Fee Agent Monthly Billing Report Form

Fee Agent's Name _____ Fee Agent's SSN or PVN _____

Fee Agent's Address: _____ Fee Agent's Telephone _____

Before you complete the form, read the instructions on the other side.

Applicant / Recipient's Name (Please Print)	Applicant/Recipient's SSN	Fee Agent Interview? (Yes/No)	Application Date	Date Application Mailed	GEN 50B \$25	GEN 72 \$15	GEN 132 GEN 75 \$15	GEN 60 \$15	GEN 152 \$15	Pend Letter \$5	Total Amount Due

Fee Agent Signature _____ Date _____ Total Amount Due \$ _____

GEN 50B		GEN 72	GEN 132 or GEN 75	GEN 60	GEN 152	Pend Letter
APA CAMA GRA	ATAP FS MEDICAID	APA Review FS Recertification GRA Review Medicaid Review	Denali KidCare Pregnant Women	GR Burial	Senior Benefits	DPA Request to Verify Citizenship and Identity Documents for Medicaid

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State of Alaska
Department of Health & Social Services/Division of Public Assistance

Instructions for Completing the Fee Agent Monthly Billing Report Form

1. Enter your **name, Social Security Number, address, report month, and district number** at the top of this form. The report month is the month that you (the Fee Agent) received the applications. Complete a separate report form for each month.
2. In the **Applicant/Recipient's Name** column, print the name of each client who gave you an application form during the month.
3. In the **Applicant/Recipient's Social Security Number** column, write the complete Social Security Number for that client.
4. In the **Fee Agent Interview** column, write Yes if an interview was done and No if you did not interview the client. Denali KidCare and Senior Benefits application do not require an interview or FA 1 form to be complete applications. All other programs require an interview and FA 1 form for the application to be complete.
5. In the **Application Date** column, write the date that you signed the application.
6. In the **Date Application Mailed** column, write the date that you mailed the application to the office. This column must be complete.
7. In the columns for the application forms **GEN 50B, GEN 72, GEN 132, GEN 75, GEN 60, GEN 152 and Pend Letter** write in the dollar amount for each form the client gave to you.
8. In the **Total Amount Due** column, write the amount due for all complete application forms you submitted. At the bottom, total the amount for all clients.
9. You must **sign and date** the form to get paid.
10. **Send this form to the district office that serves your area.** Remember, the district office must receive your signed report by the 10th of each month. If the district office receives your report after the 10th, it will be submitted for payment the following month.

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